LCQ4: Tackling novel coronavirus epidemic

Following is a question by the Hon Kwong Chun-yu and a reply by the Secretary for Food and Health, Professor Sophia Chan, in the Legislative Council today (March 18):

Question:

The World Health Organization has described the outbreak of novel coronavirus as a pandemic in view of the outbreak having spread to more than 110 countries and territories around the world. Regarding the tackling of the epidemic, will the Government inform this Council:

- (1) whether it has grasped the whereabouts of the people who came from Hubei Province and are now staying in Hong Kong; if so, of their number and, among them, the respective numbers of those who are receiving treatment in hospitals and those who have been admitted to quarantine centres; if not, the reasons for that;
- (2) of the total number of face masks in the Government's stock as at the 3rd of this month; the new measures in place to ensure that there is a sufficient supply of compliant face masks for use by healthcare personnel and that members of the public can buy face masks at reasonable prices; and
- (3) as a medical team of the University of Hong Kong has projected that the local epidemic will reach its peak in May this year, whether the existing manpower in medical, nursing and various allied health grades as well as the current number of isolation beds are sufficient to tackle the epidemic, and whether the Government has made adequate preparations for tackling the epidemic in the light of the aforesaid projection or its own projection; if not, of the reasons for that?

Reply:

President,

Since the outbreak of coronavirus disease-2019 (COVID-19), the Government has been closely monitoring the development of the outbreak situation. Guided by the three key principles of "responding promptly", "staying alert to the situation" and "working in an open and transparent manner", we have continued to adopt the "containment" strategy based on science and experts' advice and secured every line of defence with a view to achieving "early identification, early isolation and early treatment of the infected". According to the Government's prevention and control strategies, we introduced a host of specific and practicable measures in the areas of health surveillance, compulsory quarantine, isolation treatment, health declaration, exit screening, reducing people flow between Hong Kong and the

Mainland, enhancing "social distancing" and supporting frontline healthcare staff, etc.

In consultation with the Security Bureau, Commerce and Economic Development Bureau, Financial Services and the Treasury Bureau and Hospital Authority (HA), my reply to the various parts of the question raised by the Hon Kwong Chun-yu is as follows:

(1) In view of the latest situation of the COVID-19 outbreak, the Government has taken a number of measures proactively since late January this year to further reduce the flow of people between the Mainland and Hong Kong. Having considered that the outbreak mainly took place in Hubei Province early on and was getting more severe, the Government announced on January 26 that, with effect from January 27, except for Hong Kong residents, all residents of Hubei Province and persons who had visited Hubei Province in the past 14 days would not be permitted to enter Hong Kong until further notice.

After the announcement of the above measure, to find out the whereabouts of persons who were from Hubei Province or had visited Hubei Province in the past 14 days and may still be in Hong Kong at that time, the Government announced on January 29 that it would reach out to hotels through the hotel industry and the Hong Kong Tourism Board to contact travellers from Hubei Province and also contact students returning to Hong Kong from Hubei Province through tertiary institutions. On the same day, the Immigration Department (ImmD) started to inspect all hotels and guesthouses in Hong Kong, with a view to locating travellers from Hubei who were still in Hong Kong for registering their contact information and providing them with health advice. Furthermore, starting from January 31, the Centre for Health Protection of the Department of Health, with the assistance of ImmD, arranged for travellers from Hubei who were still in Hong Kong to move into quarantine centres, or arrange those who displayed no symptoms to leave Hong Kong as soon as possible.

The ImmD had completed inspections of 1 837 hotels and guesthouses by February 7. A total of 55 travellers from Hubei were identified during the inspection. At the time, 31 of them left Hong Kong on their own, 10 left Hong Kong with the assistance of the HKSAR Government, and 4 moved into the quarantine centre at Lei Yue Mun Park and Holiday Village (all have now completed quarantine). For the remaining 10 people, no quarantine was required as they had departed Hubei for more than 14 days, and all of them had thereafter left Hong Kong on their own.

Furthermore, as at March 16, among the 157 patients confirmed with the disease, 12 had visited Wuhan or are Wuhan residents. Out of them, 10 have recovered and have been discharged, one passed away and one is still hospitalised for isolation treatment.

(2) As regards the stock of masks, according to the information from the Government Logistics Department (GLD), since early January, the Government has been adopting a multi-pronged approach to procure masks directly through different channels and means, without undergoing any tendering procedures,

with a view to securing the resources in the shortest time possible to meet the operational needs of the Government. As long as the items provided by the manufacturers and suppliers meet the required specifications and are sold according to prevailing market prices, GLD will make an immediate purchase and there is no question of "the lowest bid wins". The Government has contacted 600 suppliers from more than 30 countries or regions, reaching as far as Egypt, Turkey, Mexico, South America, etc. The Overseas Economic and Trade Offices and individuals have also rendered proactive support.

Among the masks ordered, more than 10 million have been delivered to Hong Kong. We hope that the remaining will arrive in batches as scheduled. As the supply of masks remain very tight around the globe and with increasing demand, global sourcing is very difficult. Even the Government has placed orders, the orders could be cancelled due to export controls suddenly imposed by some countries or regions. That said, the Government will continue to work hard on sourcing masks globally.

The Government expects that the supply of masks will remain tight for some time in the near future. Currently, the stock of masks kept by GLD can last for about two months for meeting the needs of government departments. The Government will prioritise the distribution of masks in the Government's stockpile following a risk-based approach, with priority accorded to healthcare workers to meet their needs. In view of the latest situation of the COVID-19 outbreak, supply of GLD's masks will be prioritised for staff participating in quarantine-related work and execution of quarantine orders, including medical and port health staff of the Department of Health and frontline staff who maintain provision of essential public services.

Furthermore, in view that the Government's outsourced cleansing service contractors have encountered difficulties in procuring masks, to protect the health of cleansing workers and maintain environmental hygiene, the Government will reserve the 700 000 additional masks produced by the Correctional Services Department (CSD) for distribution to the frontline cleansing workers employed by the Government's outsourced service contractors to meet their imminent needs. The relevant government departments have accorded priority to distributing masks to the cleansing workers responsible for cleaning public toilets, public markets, refuse collection points, streets and public housing estates since February 17.

In addition, the Government has provided one million masks for the staff of subvented, contract, self-financing and private residential service units, including residential care homes for the elderly and residential care homes for persons with disabilities licensed by Social Welfare Department, so as to assist them to continue to provide services. The Government has also received donations of masks from some groups and individuals, and will distribute the items to needy bodies and disadvantaged groups in society according to the wishes of the donors.

At the same time, the Government has taken steps to follow up on the recommendation to increase local production. Under the Anti-epidemic Fund, the Local Mask Production Subsidy Scheme will provide financial assistance to

facilitate the establishment of mask production lines in Hong Kong, so as to address the shortage situation and build up reserve stock. The CSD has also increased its mask production volume to meet the needs of government departments. As for retail, the Government has been in liaison with suppliers and retailers at all levels. It is hoped that when stock is available, it can be handled without causing too much inconvenience to members of the public.

- (3) As regards the work of public hospitals in prevention and control, HA has put in place an established mechanism to deploy manpower of frontline staff to meet operational needs. In view of the latest situation of the COVID-19 outbreak, HA announced on February 15 to adjust non-emergency and non-essential medical services significantly in the four weeks starting from February 17, so as to focus manpower and resources such as personal protective equipment on providing care for the most critical patients and responding to the outbreak. Specific measures include:
- (1) except for emergency and essential treatment, non-emergency services such as elective surgeries will be postponed;
- (2) specialist outpatient clinics will contact patients with stable conditions to reschedule their appointments and arrange drug refills for them according to their conditions; and
- (3) except for emergency and essential examinations, non-emergency examinations such as routine endoscopy will be rescheduled.

Furthermore, as at noon of March 17, 954 isolations beds were being used by HA with occupancy of around 40 per cent. Each HA cluster will continue to closely monitor the situation and allocate resources to mobilise the other isolation beds when required.

Thank you, Mr President.